FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

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FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	Serial							
DAT	TE RECEIVED							
	1							

Name of Offering ( check if this is an amendment and name has changed, and indicate of Horsley Bridge VIII, L.P.	hange.)
Filing Under (Check box(es) that apply):	Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment	<u> </u>
A. BASIC IDENTIFICATION DATA	302 7 0 2
Enter the information requested about the issuer	
Name of Issuer (  check if this is an amendment and name has changed, and indicate check  check  check if this is an amendment and name has changed, and indicate check  c	ange.)
Address of Executive Offices (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111	Telephone Number (Including Area Code) (415) 986-7773
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code SED
Brief Description of Business  To make investments in entities organized primarily for the purpose of making private equity	investments. JUL 1 5 2005 THOMSON
Type of Business Organization  corporation  business trust  Ilmited partnership, already formed  limited partnership, to be formed	FINANCIAL
Actual or Estimated Date of Incorporation or Organization:  Month  Year  O 5  D 5  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation CN for Canada; FN for other foreign Jurisdiction of Canada; FN for other foreign Jurisdiction CN for Canada; FN for other foreign Jurisdiction of Canada; FN for other foreign Jurisdiction CN for CANADA CN for CN f	

General Instructions

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Control number.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Horsley Bridge Partners LLC Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21 st Floor, San Francisco, CA 94111 □ Promoter Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) HBI VIII, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Horsley, Phillip Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 Check Box(es) that Apply: ✓ Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Bridge, Gary L Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 Check Box(es) that Apply: □ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Phillips, Duane E. Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 □ Promoter ☐ Beneficial Owner Executive Officer Director Check Box(es) that Apply: J General and/or Managing Partner Full Name (Last name first, if individual) Giuffrida, Alfred J. Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21 st Floor, San Francisco, CA 94111 Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Reeve, Dan Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Please see Continuation Pages

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Promoter Executive Officer Check Box(es) that Apply: Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Berkowitz, Fred E. Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 Beneficial Owner Executive Officer Director Promoter General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Abbott, Kathryn Business or Residence Address (Number and Street, City, State, Zip Code) 43-45 Langton Street, Flat E, London, England SW10 0JL □ Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: ☐General and/or Managing Partner Full Name (Last name first, if individual) Freeman, Josh Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 □ Promoter Beneficial Owner Executive Officer Director General and/or . Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Cottrill, Lance Business or Residence Address (Number and Street, City, State, Zip Code) 505 Montgomery Street, 21st Floor, San Francisco, CA 94111 Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Continuation Page

				<u>B. II</u>	VFORMA	TION AB	OUT OF	FERING	-			
1.	Has the issu	er sold, or d Ar	oes the issue swer also in	er intend to Appendix,	sell, to non- Column 2, i	accredited i f filing unde	nvestors in er ULOE.	this offering	g?		Yes	No ⊠
2.	What is the	minimum in	vestment th	at will be a	ccepted fron	n any indivi	dual?				3 <u>00,000</u>	
3.	Does the offe	ring permit	ioint owners	shin of a sir	ngle unit?						Yes	No ⊠
	Enter the in											
	commission of person to be states, list the broker or dea Members of connection w	or similar re listed is an ne name of aler, you ma the Managin ith the Offer	muneration associated the broker of y set forth the ng General in ing.	for solicita person or a or dealer. the informa	tion of purch igent of a bi If more thai ition for tha	nasers in co roker or dea n five (5) pe t broker or	nnection wi ller register ersons to be dealer only.	th sales of s ed with the listed are . The Offer	ecurities in SEC and/o associated p ing is being	the offering or with a sta persons of so conducted	. If a ate or uch a <i>by the</i>	
Full	Name (Last n	ame first, if	individual)								•	
Busir	ness or Reside	ence Addres	s (Number a	nd Street, (	City, State, 2	Zip Code)	<del></del>					
Name	e of Associate	d Broker or	Dealer	<u>.</u>		<u> </u>						
State	s in Which Po	erson Listed	Has Solicite	ed or Intend	is to Solicit	Purchasers						·
	(Check "All S	tates" or che	eck individu	al States)					••••••	•••••••		All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
	Name (Last n			[***3			19	(1111)			(**-2)	(2.20)
Busin	ess or Reside	nce Address	(Number a	nd Street, (	City, State, 2	Zip Code)						
Name	of Associate	d Broker or	Dealer						<u> </u>		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	s in Which Pe											
	Check "All S											All States
[AL] [IL] [MT]	(AK) [IN] (NE)	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]
[RI]	[SC] Jame (Last na	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Busin	ess or Reside	nce Address	(Number ar	nd Street, C	City, State, 2	Zip Code)		<del></del> ,				
Name	of Associated	l Broker or I	Dealer									
States	in Which Pe	rson Listed	Has Solicited	d or Intend	s to Solicit I	Purchasers						
(0	Check "All St	ates" or che	k individua	l States)			••••••••••••••••••••••••••••••••••••••		•••••••••••••••••••••••••••••••••••••••			All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
111	[30]					se additiona					[** 1]	[* 1/]

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	C. OFFERING PF	RICE, NUMBER OF INVESTORS, EXPE	ENSES AND USE OF PR	OCEEDS
1.	already sold. Enter "0" if answe	ice of securities included in this offering and the r is "none" or "zero". If the transaction is an exch in the columns below the amounts of the securit l.	ange offering,	
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt		\$	\$
	Fauity		\$	\$
	<b>244-</b>			
		Common Preferred		
		ncluding warrants)		\$
	Partnership Interests		\$1,006,100,000	\$ <u>1,006,100,000*</u>
	Other (Specify		\$	\$
	Total		\$_1,006,100,000	\$ <u>1,006,100,000*</u>
	Answer als	so in Appendix, Column 3, if filing under ULOE.		
2.	this offering and the aggregate d indicate the number of persons w	and non-accredited investors who have purchased ollar amounts of their purchases. For offerings unwho have purchased securities and the aggregate dies. Enter "0" if answer is "none" or "zero".	ider Rule 504,	
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		34	\$ <u>1,006,100,000*</u>
	Non-accredited Investors			0
	Total (for filing	s under Rule 504 only)		\$
	A	answer also in Appendix, Column 4, if filing under	ULOE.	
3.	If this filing is for an offering u securities sold by the issuer, to do	nder Rule 504 or 505, enter the information requate, in offerings of the types indicated, in the twelves in this offering. Classify securities by type listens	uested for all e (12) months	
	Type of Offering	Not Applicable	Type of Security	Dollar Amount Sold
	Rule 505			\$
	Regulation A		•••	\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all e securities in this offering. Excissuer. The information may be	expenses in connection with the issuance and distribute amounts relating solely to organization experiences as subject to future contingencies. If the an estimate and check the box to the left of the es	ibution of the penses of the amount of an	
	<u> </u>			<u> </u>
		Costs		\$ \$200,000
	•			\$
	0 0			\$
	Other Expenses (identify)	fy finders' fees separately)		\$ \$160,000 \$360,000
	Total			\$360,000
*Inc	cludes sales of \$304,500,000 sold to	nine foreign investors not reflected on the Append	ix.	

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	C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENS	ES AN	D USE OF PRO	OCEEDS
	b. Enter the difference between the aggreg Question 1 and total expenses furnished difference is the "adjusted gross proceeds to t	ate offering price given in respin response to Part C-Ques	ponse to	o Part C- a. This	\$ <u>1.005,740,000</u>
5.	Indicate below the amount of the adjusted gr be used for each of the purposes shown. I furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b above.	f the amount for any purpose the left of the estimate. T	e is not he tota	t known, al of the	
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			\$	<b>\$</b>
	Purchase of real estate			\$	<u> </u>
	Purchase, rental or leasing and installation of mach	inery and equipment		\$	<b>\$</b>
	Construction or leasing of plant buildings and facilit	ies		\$	<b></b> \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the as pursuant to a merger)	sets or securities of another issue		\$	<b>\$</b>
	Repayment of Indebtedness			\$	<b></b> \$
	Working Capital			\$	<b>S</b>
	Other (specify): Private Equity Investments	•		. \$	\$1,005,740,000
	Column Totals			\$	\$1,005,740,000
	Total Payments listed (column totals added)			<b>⊠</b> \$ <u>1</u>	.005,740,000
	<u> </u>	FEDERAL SIGNATURE			
gna	ssuer has duly caused this notice to be signed by the u iture constitutes an undertaking by the issuer to furni nformation furnished by the issuer to any non-accredit	sh to the U.S. Securities and Excha	nge Com	mission, upon writt	Rule 505, the following en request of its staff,
sue	r (Print or Type)	Signature		Date	
ors	ley Bridge VIII, L.P.	De my		July 11, 2005	
am	e of Signer (Print or Type)	Title of Signer (Print or Type)		ļ	
uar	e E. Phillips	Member, Horsley Bridge Partners	LLC, M	anaging General Pa	rtner of the Issuer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STA	TE SIGNATURE								
1.	1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification  Provisions of such rule? Not applicable - Rule 506 Offering									
	See Appendix, Column 5, for state response									
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	e issuer has read this notification and knows the contents to be traderigned duly authorized person.	ue and has duly caused this notice to be signed on	its behalf by the							
Issu	uer (Print or Type)	Signature	Date							
Horsley Bridge VIII, L.P.  July 11, 2005										
Nan	ne (Print or Type)	Title (Print or Type)								
Dua	ane E. Phillips	Member, Horsley Bridge Partners LLC, Manag Issuer	ing General Partner of the							

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PPENDIX				
1	Intend to non-a investors	2 I to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in State (Part C - Item 1)	4  Type of investor and amount purchased in State (Part C - Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)*	
State	Yes	No	Limited Partner Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		Х	1,006,100,000	8	20,600,000				
со									
СТ									
DE									
DC									
FL									·
GA		X	1,006,100,000	1	25,000,000		<u> </u>		
ні									
ID									
IL		X	1,006,100,000	3 .	160,000,000				
IN				·		,			
IA									
KS			·						
KY									
LA									
ME	,								
MD		Х	1,006,100,000	1	15,000,000				
МА		Х	1,006,100,000	4	215,000,000				
MI		Х	1,006,100,000	1 	15,000,000		<u> </u>		
MN									
MS									
мо			MIA. Rule 506 Offer						

<sup>\*</sup>Not applicable under NSMIA. Rule 506 Offering.

				Al	PPENDIX	4			
1	Intend to non-a investor.	2 I to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in State (Part C - Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)*				
State	Yes	No	Limited Partner Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT				-					
NE	- · · - · ·		_						
NV					·				
NH									
NJ									
NM							۰		
NY		Х	1,006,100,000	. 1	50,000,000				
NC					·				
ND									
ОН		Х	1,006,100,000	1	70,000,000				
ОК									
OR							•		
PA									
RI	**								
sc									
SD									
TN							· · · · · · · · · · · · · · · · · · ·		
TX		Х	1,006,100,000	5	131,000,000				
UT									
VT									
VA									
WA									
wv			•						
WI									
WY									
PR			A. Rule 506 Offering.						

<sup>\*</sup>Not applicable under NSMIA. Rule 506 Offering. BOS1506502.1